

Take part in
the Great
American
Smokeout!

Health Beat

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The Great American Smokeout

The Great American Smokeout is a nationally recognized event designed to raise awareness about the health benefits associated with being a non-smoker and to encourage smokers to give up tobacco for at least one day.

The event is intended to provide encouragement and support to smokers ready to kick the habit. Just as starting is a choice, quitting can be too. Anyone with the desire can become smoke-free, but the Great American Smokeout aims to make that transition easier.

Millions of smokers will refrain from lighting up or chewing on the third Thursday in November in honor of the event. This is a way to find out if you are really ready to quit and many report to succeed without ever smoking again.

Stopping Leads to Fresh Start

By Noemi Orozco

Many smokers don't even know what it really is that they are inhaling. There are more than 4,000 chemicals in cigarette smoke. Over time, the ashes, tar, gases, and other poisons in cigarettes harm your body, especially your heart and lungs. They also make it harder for the body to fight infections or to taste and smell things.

Ex-smokers say that quitting was the hardest thing they ever did. If you've ever felt hooked, you're most likely addicted to nicotine, an ingredient found in all to-

bacco products. Nicotine gives a calm and satisfied feeling, while at the same time making you feel more alert and focused. The more you smoke, the more nicotine you need to feel good.¹

Quitting is difficult because it can be a big part of daily life and everyday habits. It may even feel uncomfortable not to smoke in places you usually smoke and breaking these habits is the hardest part of quitting for some smokers.¹ Quitting may take several tries, but remember that millions of people have done it and you can do it too!²

Everyone knows breaking an ingrained habit is easier said than done, but really wanting to quit is the first step. The following are some simple tips and guidelines to quit smoking. Think about why you want to quit in the first place and be serious about the decision.¹ Helpful reminders, such as this list of reasons to quit, can be put in places where you might find yourself having the urge to smoke. Good places are:

- Where you keep your cigarettes
- In your wallet or

(Continued on page 2)

Misleading Marketing for Women

By Kristen Force

Smoking is not usually considered a "woman's health issue" like osteoporosis or breast cancer, but statistics show the number of women affected by smoking has more than doubled in the last 40 years,

having a significant impact on women's health.¹

Health officials largely blame advertising for the sharp increase in female smokers, citing the tobacco industry's tar-

(Continued on page 2)



In California, state law bans smoking in workplaces, such as office buildings, restaurants, and bars.

Misleading Marketing...

getting of women in ads and other marketing material.

As women take on more dominant roles in society and have greater spending power, businesses must work to appeal to this changing market segment. Studies show that tobacco companies devise specific campaigns just for women.² From female-targeted brands like Virginia Slims to the sponsoring of women's tennis matches, advertising directed at women is everywhere.



Cigarette marketing correlates women who smoke with desirability, independence, and happiness.

Substantial evidence has been found that tobacco companies extensively target young women, minorities, and those in developing countries. Health risks are shown to be of less concern as education levels decrease.²

In addition to the health risks shared by all smokers, such as cardiovascular disease and emphysema, women face additional health consequences that do not affect men. Smoking can lead to complications during pregnancy, cervical cancer, and

problems with menstrual function.¹

California has maintained a statewide tobacco control program since the late 1980s and has seen encouraging results from the effort. In California, the incidence rate of lung cancer in women declined by nearly 5% between 1988 and 1997. Other regions of the United States without similar programs experienced a 13.2% increase during the same time period.¹

References:

1. www.hhs.gov
2. www.ash.org

Stopping Leads...

- purse
- In the kitchen
- In your car¹

Before you quit, START by taking these five important steps offered by www.smokefree.gov:

- S = Set a date to quit.
- T = Tell family, friends, and co-workers that you plan to quit.
- A = Anticipate and plan for the challenges you'll face while quitting.
- R = Remove cigarettes and other tobacco products from your home, car, and work.
- T = Talk to your doctor about getting help to quit.¹

Medications can also help you stop smoking and lessen the urge to smoke. The U.S. Food and Drug Administration (FDA) has approved five

medications to help you quit smoking:³

1. Bupropion SR—Available by prescription.
2. Nicotine gum—Available over-the-counter.
3. Nicotine inhaler—Available by prescription.
4. Nicotine nasal spray—Available by prescription.³
5. Nicotine patch—Available by prescription and over-the-counter.³

The Surgeon General recommends asking your health care provider for advice and carefully reading the

information on the package of any medication you use.³

Whatever your reasons and means of quitting may be, be sure to get reliable information and ask for support from friends and loved ones. You can find additional information about quitting at the sources used for this article, listed below.

References:

1. www.smokefree.gov
2. www.cdc.gov/tobacco
3. www.surgeongeneral.gov/tobacco

Tips for Quitting

- Write down why you want to quit
- During a craving, try drinking water or chewing gum
- Exercise to relieve stress instead of smoking
- Form a support group for encouragement
- Get plenty of sleep and eat balanced meals
- Don't be discouraged if

Seeing Through the Smoke

By Amanda Matthews

In 2001, 420 billion cigarettes were consumed. How many of these cigarettes were consumed by young adults? Smoking statistics published by the American Lung Association provide insight about the smoking habits for individuals 18 and older. The data is both surprising and promising.

Compared to other age groups, the 18-24 group had the highest percentage of smokers (26.9%).¹ In previous years, the percentage of smokers aged 18-24 was significantly lower than the percentage of smokers aged 25-44. Most smokers report that they began smoking during their college age years. Ninety percent of adult smokers started by the age of 21, and 50% of these individuals became regular smokers by the age of 18.¹

Currently 7.2 million smokers are between 18-24 years of age. Nonsmokers make up the majority of individuals aged 18-24. More than half,

65.3%, of young adults say they have never smoked.¹ The data can also be analyzed according to gender and education level. (Table 1) More men than women smoke. However, smoking has decreased since 1974 for all adults, regardless of educational level or sex. A sharper decline in smoking was observed among adults with greater than 12 years of education.¹

The number of heavy smokers, defined as individuals who smoke more than 24 cigarettes per day, has also decreased significantly. Increased awareness about health risks and fewer public places to smoke possibly contributed to this reduction.

Smokers between 18 and 24 make up 5.2% of people consuming more than two packs per day, significantly less than the 1974 level of 15.1%.¹ Heavy smoking was less prevalent among individuals with more education.

Statistics about smoking cessation are also revealing. The percentage of former smokers (out of all adults who have ever smoked or who currently smoke) is 48.8% for individuals with 13-15 years of education. The percentage increases to 66.2% for individuals having more than fifteen years of edu-

cation. For adults between 18-24, the percentage of smokers who no longer smoke is a much lower 22.4%.¹ Overall, comparing the numbers since 1965 reveals a trend favoring smoking cessation.

TABLE 2

	Tobacco users age 18-24	Users with 13-15 yrs education	Users with more than 15 years education
Cigars	21.60%	19.40%	19.00%
Pipes	17.00%	7.90%	6.50%
Chewing Tobacco	17.40%	18.10%	12.70%
Snuff	30.90%	27.70%	19.30%

Usage of other tobacco products.
SOURCE: National Health Interview Survey, 2000

Cigarettes aren't the only form of tobacco used by adults aged 18-24. In this age group, 21.6% consume cigars, 17% smoke pipes, 17.4% use chewing tobacco, and 30.9% use snuff. (Table 2) These percentages are lower for individuals with greater than 12 years of education.

As a whole, these findings reflect the smoking patterns of young adults and indicate that smoking rates will continue to decline over time.

References:

1. www.lungusa.org

TABLE 1

	Current	Former	Never
Education 12 years			
Male	38.9%	7.2%	53.9%
Female	24.9%	7.8%	67.3%
>12 years			
Male	21.2%	7.3%	71.4%
Female	21.8%	8.7%	69.5%

Percentage of smokers age 18-24 by education level and gender.

SOURCE: National Health Interview Survey, 2001



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Attention Females - Ages 18-30

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**Not pregnant / not planning a pregnancy in the next 8 months*

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Smoking: The Silent Killer

“Cigarette smoking is the major cause of cancer mortality in the United States,” according to the Surgeon General. Ironically, it is also the most preventable.

Not only does tobacco cause numerous types of cancer, including lung, esophageal, oral (mouth, tongue, lips), larynx, and pharynx, but it is also one of the major causes of heart-related deaths. It is also the cause for other respiratory diseases such as emphysema, bronchitis, and stroke.

With all of this information, one must ask him or herself, “Why would anyone even think about

lighting up and smoking anything that contains tobacco?” The answer would be NICOTINE. Nicotine is the addictive substance found in tobacco products. The addiction that nicotine causes in tobacco users can be compared to the addiction seen in users of drugs like heroine and cocaine. Nicotine is absorbed through inhaled tobacco smoke or through the lining of the mouth in those who chew tobacco or do not inhale cigars.

There is no safe substitute for cigarettes. Many people think that by not inhaling cigar smoke, no damage will be done, but that is definitely untrue. Although the

By Cynthia Chavez

amount of carcinogens do not enter the lungs as quickly and as abundantly as it would through cigarette smoke, it does eventually reach the lungs.

Smokeless tobacco is not a safe substitute for smoking. It can cause cancer of the oral cavity, irritate the gums, which in turn can expose the root of the tooth, and increase sensitivity to hot and cold.¹

References:

1. www.cancer.org

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